

SAFETY COURSE REGISTRATION CARD FOR (Please ✓ One)☐ Boating ☐ Snowmobile ☐ All-Terrain Vehicle☐ Hunter Ed. Basic ☐ Hunter Ed. Advanced ☐ Bowhunter

Course ID No. _____

Form 8500-130 (R 4/97)

Personally identifiable information on this form is not intended to be used for any other purpose.

Mail Copies to:

Department of Natural Resources

Bureau of Law Enforcement

P.O. Box 7921

Madison, WI 53707-7921

Name of Meeting Place	County of Course	Instructor Number
Street or Route	Instructor Name	
City, State, Zip Code	Supplies will be shipped to Instructor's home unless specified differently here:	
Classes will be held each: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> S M T W R F S	Please indicate any recent change of address for Instructor here:	
Beginning on - - at <input type="checkbox"/> am <input type="checkbox"/> pm	Number of Student Packets Needed	Contact Telephone Number - -
Ending on - -	Signature of Instructor	Date Mailed - -
Other		

Please Note: Supplies will be mailed to the instructor from Madison warehouse. Allow up to two (2) weeks for delivery.